Substitute f r FORM PTO-1449 INFORMATION DISCLOSUME COMPATION IN AN APPLICATION (Use several sheets if necessary)					Attorney Docket Number 101.0094-02000 Applicant Gary K. Michelson, M.D.				Label No. ED149927699US Customer No. 22882		
									Application Number 10/808,852		
					Filing Date			Group Art Ur	nit Examiner		
Sheet <u>1</u> of <u>1</u>				March 25, 2004				3738	N/A		
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EXAMINER	Stephen Kenny	DATE	CONSIDER	RED	8/15	1/25	· · · · · · · · · · · · · · · · · · ·				

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INFORMATION DISCLOSURE CITATION IN AN APPLICATION				Applicant		Application Number (Cont. of 09/572,518)						
				Gary K. Michelson								
(Use several sheets if necessary)				Filing Date		Group Art Ur	it Examiner					
Sheet <u>1</u> of <u>1</u>				March 24, 2004			(D. Isabella)					
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EXAMINER Stephen Kenny DATE CONSIDERED 8/15/05												
EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP § 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to the applicant.												